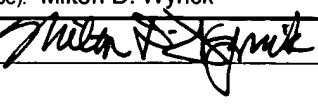
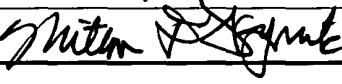


UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.: S-100,513
		First Inventor or Application Identifier: Frank E. Merrill et al.
		Title: ELECTRON RADIOGRAPHY
		Express Mail Label No.: ET461826263US
APPLICATION ELEMENTS		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> 3. <input checked="" type="checkbox"/> Specification <small>[Total Pages: 9]</small> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Descriptive title of the Invention <input type="checkbox"/> Cross References to Related Applications <input checked="" type="checkbox"/> Statement Regarding Fed sponsored R&D <input type="checkbox"/> Reference to sequence listing, a table or a computer program listing appendix <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawings (if filed) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim(s) <input checked="" type="checkbox"/> Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawings(s) <small>(35 U.S.C.113)[Total Sheets: 2]</small> <ul style="list-style-type: none"> <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal 5. <input checked="" type="checkbox"/> Declaration & Power of Attorney <small>[Total Pages: 2]</small> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application <small>(37 C.F.R.§.63(d))</small> <small>(for continuation/divisional with Box 16 completed)</small> c. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).</small> 		6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
		7. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies
ACCOMPANYING APPLICATION PARTS		
8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documentation)		
9. <input type="checkbox"/> 37 C.F.R.§3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>		
10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
11. <input type="checkbox"/> Preliminary Amendment		
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small>		
13. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>		
14. <input type="checkbox"/> Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i)		
15. <input type="checkbox"/> Other:		
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application S.N. _____ / _____.		
Prior application information: Examiner: Group/Art Unit:		
<small>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small>		
16. CORRESPONDENCE ADDRESS		
<input type="checkbox"/> Customer Number or Bar Code Label		OR <input type="checkbox"/> Correspondence Address Below
<small>(Insert Customer No. or Attach Bar Code Label here)</small>		
Name: Milton D. Wyrick Address: Los Alamos National Laboratory LC/IP, MS A187 City: Los Alamos State: New Mexico Zip Code 87545 Country United States Telephone: (505) 665-3659 Fax: (505) 665-4424		
Name (Print/Type): Milton D. Wyrick		Registration No. (Attorney/Agent): 29,993
Signature: 		Date: 30 July 2003

15535 U.S. PTO
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 07/30/03

FEE TRANSMITTAL For FY 2003		Complete if Known																																																																																																																									
<small>Patent fees are subject to annual revision (submit an original and a duplicate for fee processing)</small>		Application Number:																																																																																																																									
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<input checked="" type="checkbox"/> The commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 12-2150 Deposit Account Name: Los Alamos National Laboratory <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>\$750</td> <td>\$375</td> <td>Utility filing fee</td> <td>375.00</td> </tr> <tr> <td>\$750</td> <td>\$375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>\$160</td> <td>\$80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL (1)</td> <td>\$375.00</td> </tr> </tbody> </table> 2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims 6</td> <td>-20** =</td> <td>0 X 0</td> <td>= 0</td> </tr> <tr> <td>Independent 1</td> <td>-3 ** =</td> <td>0 X 0</td> <td>= 0</td> </tr> <tr> <td>Claims</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>=</td> </tr> </tbody> </table> <p><i>** or number previously paid, if greater; For Reissues, see below</i></p> <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>\$18</td> <td>\$9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>\$84</td> <td>\$42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>\$280</td> <td>\$140</td> <td>Multiple dependent claim, if not paid.</td> <td></td> </tr> <tr> <td>\$84</td> <td>\$42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>\$18</td> <td>\$9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL (2)</td> <td>\$-0-</td> </tr> </tbody> </table>		Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid	\$750	\$375	Utility filing fee	375.00	\$750	\$375	Reissue filing fee		\$160	\$80	Provisional filing fee				SUBTOTAL (1)	\$375.00	Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid	Total Claims 6	-20** =	0 X 0	= 0	Independent 1	-3 ** =	0 X 0	= 0	Claims				Multiple Dependent			=	Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid	\$18	\$9	Claims in excess of 20		\$84	\$42	Independent claims in excess of 3		\$280	\$140	Multiple dependent claim, if not paid.		\$84	\$42	** Reissue independent claims over original patent		\$18	\$9	** Reissue claims in excess of 20 and over original patent				SUBTOTAL (2)	\$-0-																																																				
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